

**SUPERIOR COURT OF ARIZONA
MARICOPA COUNTY**

Name of Petitioner/Plaintiff

Case Number: _____

**ORDER ON SUPPLEMENTAL
APPLICATION (AFTER HEARING)**

Name of Respondent/Defendant

A SUPPLEMENTAL APPLICATION WAS FILED and a hearing was held

☐ Applicant appeared **OR** ☐ Applicant did **not** appear

THE COURT FINDS that the applicant (print name) _____:

1. ☐ **IS ELIGIBLE FOR A WAIVER** because
- ☐ The applicant is considered to be permanently unable to pay:
- ☐ Receives government assistance from the Temporary Assistance to Needy Families Program (TANF), the Food Stamp Program, Arizona's General Assistance Program (GA) or the Supplemental Security Income Program (SSI).
- ☐ Has an income that is insufficient or barely sufficient to meet the daily essentials of life and that includes no allotment that could be budgeted for the fees and/or costs that are required (e.g., monthly gross income 150% or less of poverty level).

OR

- ☐ The court exercises its discretion to grant a waiver as necessary and appropriate. (ARS 12-302(M)).

2. ☐ **IS ELIGIBLE FOR FURTHER DEFERRAL** of fees and/or costs. Although none of the grounds set forth above apply; the applicant has shown good cause for further deferral. (**Court must establish a schedule of payments.**)

OR

3. ☐ **IS NOT ELIGIBLE FOR A WAIVER OR FURTHER DEFERRAL** of fees and/or costs.

IT IS ORDERED: (Check all boxes that apply)

1. ☐ **WAIVER IS GRANTED** for unpaid fees and/or costs in the amount of \$_____.

2. ☐ **WAIVER IS DENIED.** The applicant does not meet the financial criteria for waiver because:

A waiver MUST BE granted if the eligibility requirements for waiver are met.

3. ☐ **FURTHER DEFERRAL IS GRANTED** for unpaid fees and/or costs in the amount of \$_____.

☐ The applicant shall pay the entire amount due by _____ (date).

☐ The applicant shall pay \$_____ each _____ (week, month etc.) until paid in full, beginning _____.

4. ☐ **FURTHER DEFERRAL DENIED** because the applicant has not demonstrated good cause. **Note:** Payment must be made within twenty (20) days of the date this order is mailed or handed to you in court.

5. ☐ **APPLICATION DENIED:**
It is incomplete because _____

You are encouraged to submit a complete application before a consent judgment is entered against you.
Note: Payment must be made within twenty days (20) days of the date this order is mailed or handed to you in court.

6. **CONSENT JUDGMENT.** If your request for a waiver or further deferral was denied, a consent judgment for the full amount of unpaid fees and/or costs will be entered. You can avoid this by paying all unpaid fees and/or costs within twenty (20) days from the date this order was mailed or handed to you.

DATED: _____

☐ Judicial Officer or ☐ Special Commissioner